

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Cash Saver #1107 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Establishment Address (number and street, city, state, zip code) 10/09/2019 Follow-up Release Date Follow-up Summary of Violations: 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 1 2 3 4 x 5 Follow-up Summary of Violations: 2 No Large Summary of Violations: 3 Complaint 4 Pre-Operational 5 Temporary 6 HACCP 7 Other (list) 1 2 3 4 x 5 Follow-up Summary of Violations: 1 2 3 4 x 5 Follow-up Summary of Violations: 1 2 3 4 x 5 Follow-up Summary of Violations: 2 No Large Summary of Violations: 3 Complaint 4 Pre-Operational 5 Temporary 6 HACCP 7 Other (list) 1 2 3 4
Establishment Address (number and street, city, state, zip code) 1042 1. Letter R1 Image: Albert 1 Image: Alb
Section C/NC R Narrative Corrected Succession Corrected Correcte
Owner's Address 307 Num St. Am Albung in 4719 Person in Charge Lary Thungson Responsible Person's E-mail Certified Food Manager Office of the Normal of Columns Area denoted in the "Summary of Violations" Certifical ITEMS are IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" Section# C/NC R Narrative Purpose: 1. Routine No TopAr Summary of Violations: Menu Type (See back of page) 6. HACCP 7. Other (list) 1 2 3 4 x 5 VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" Section# C/NC R Narrative 192 C R Observed (2) outdockd if funs in delir whell wase 193 C R Musicued all sombra of 500 ppm Corrected By
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Person in Charge Lary The mose A Responsible Person's E-mail Cartified Food Manager Off Cottel (12/1/21) Certified Food Manager Off Cottel (12/1/21) Certified Food Manager Off Cottel (12/1/21) Certified I fems are identified in the Checklist and narrative columns marked "C" Violation(s) repeated from previous inspections are denoted in the "summary of violations" and in the narrative below as "r" Section# C/NC R Narrative To be Corrected By 192 C R Observed (2) outdooked is found in which case Discorded 4. Pre-Operational 5. Temporary Menu Type (See back of page) 1 2 3 4 × 5 To be Corrected By To Be Corrected By 192 C R Observed (2) outdooked is found in which case Discorded Colrected
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443 C R Mensured duli souther at 500 ppm Corrected
443 C R Mensured duli souther at 500 ppm Corrected
- Ecolob vishe store to adjust
- deli shoff advised to add more H2O and fest
218 NC R Observed scam missing from freezer at reciering, Corrected
- PIC provided involve for compareind refrigerator / part ordered
297 NC R Observed milding occurring at corners of produce retail Cornected
- unit was deep-chaned after putine but will need to
he rentirely menitored
-PK had wit chand
310 NC R Observed dust on dwing malk-in ceiling Cornected 416 NC R Observed dust Flies in dwing case. Cornected
-PK has wakly CPO scruius to solve issue
- Doiry shaff advised to when ofthe
Issues were able to be abused at time of inspection
Received by (name and title printed): Inspected by (name and title printed):
LAMY THOPASOU A.). Ingram (EHS)
Received by (signature): Inspected by (signature):
Tan Ilm
cc; cc;